

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | A-H | 42198 | 11/10/98 |
| O.I.P.E. CLASSIFIER | | 9 | 11/18/98 |
| FORMALITY REVIEW | BB | 68971 | 11/27/98 |

INDEX OF CLAIMS

| | | | |
|---|-------------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — | (Through numeral)... Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here